IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Ravi Chandran and Daniel J. Marchok

Application No.: 10/019,617   Group: 2626

Filed: May 28, 2002   Examiner: James S. Wozniak

Confirmation No.: 6430

For: Coded Domain Noise Control

Mail StopAmendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment and Reply to Non-Compliant Amendment for filing in the above-identified application.

☐   Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

☐   A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	66	MINUS	* 66	0
INDEP	4	MINUS	** 4	0
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY

RATE	ADDIT. FEE
X $ 25	$
X $105	$
+ $185	$

OR

OTHER THAN SMALL ENTITY

RATE	ADDIT. FEE
X 50	$ 0
X $210	$ 0
+ $370	$ 0

* not fewer than 20
** not fewer than 3

TOTAL = $ 0

TOTAL = $ 0

The Application Size Fee has been calculated as shown below:
(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)

SMALL ENTITY

Rate	Total Amount Owed
X $130	$[ ]

OTHER THAN SMALL ENTITY

Rate	Total Amount Owed
X $260	$[ ]

Payment Sufficient for up to

[ ] Sheets

Petition for Extension of Time

☐ Applicant hereby petitions to extend the time to respond to the [ ] dated [ ] for [ ] month(s) from [ ] to [ ]. The appropriate fee is set forth below.

☐ *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

Please charge Deposit Account No. 08-0380 for the following fees:

☐   Petition for [   ] month Extension of Time $ _____

☐   Claims Fee $ _____

☐   Application Size Fee $ _____

☐   Other Fees:

     $ _____

_____ $ _____

_____   TOTAL: $ _____

A check is enclosed in payment of the following fees:

☐   Petition for [   ] month Extension of Time $ _____

☐   Claims Fee $ _____

☐   Application Size Fee $ _____

☐   Other Fees:

     $ _____

_____ $ _____

_____   TOTAL: $ _____

☒   Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By__/Mark B. Solomon, Reg. No. 44348/_____
for Mark B. Solomon
Registration No.: 44,348
Telephone (978) 341-0036
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133
Dated: 11/17/08